## Appendix 1

## Comparison of Wisconsin SeniorCare and Wisconsin Medicaid Policies

The table below compares Wisconsin Medicaid and Wisconsin SeniorCare policies.

Policy	Same as Wisconsin Medicaid	Comment
Provider help desk	Yes	
Claims submission methods	Yes	
Compound dispensing	Yes	
34 and 100 days' supply	Yes	
Prospective Drug Utilization Review (DUR)	Yes	
Dispensing fee	Yes	
Retrospective DUR	Yes	
Lock-In	Yes	
Remittance and Status (R/S) Report	Yes	Medicaid and SeniorCare claims will appear on the same weekly R/S Report.
Eligibility verification	Yes	
Participant customer service	No	(800) 657-2038.
Prior authorization (PA)	No	Drugs without a manufacturer rebate agreement are not covered and cannot be obtained with a PA.
Pharmaceutical Care (PC)	No	Must have participant's prior consent during deductible and spenddown levels of participation to receive and be charged for PC service. SeniorCare will reimburse PC services during copayment period, same as Wisconsin Medicaid.
Copayment	No	\$5 on each generic prescription drug, generic insulin, and compound drug. \$15 for each brand-name prescription drug and insulin.
Copayment exemptions	No	Medicaid exemptions do not apply to Wisconsin SeniorCare.
Covered drugs	No	Legend drugs and over-the-counter insulin with a signed manufacturer rebate agreement.

Policy	Same as Wisconsin Medicaid	Comment
Drug reimbursement rate	No	<ul> <li>Level 1 (copayment) — Wisconsin SeniorCare reimburses pharmacies up to the SeniorCare rate.</li> <li>Level 2 (deductible) — participant pays up to the SeniorCare rate (Medicaid ingredient rate plus 5%, plus the Medicaid dispensing fee).</li> <li>Level 3 (spenddown) — participant pays up to retail price.</li> </ul>
Identification cards	No	SeniorCare card. Refer to Appendix 2 of this section for an example.
Age restriction	No	Participants must be 65 years of age or older.
Managed care	No	SeniorCare participants will not be enrolled in Medicaid managed care programs.
Coordination of benefits	No	Pharmacies are required to submit any out-of-pocket expenses the participant incurs in the "Patient Paid Amount" field and any other insurance payments in the "Other Payor Amount" field.